

Richard Kosick & Co.
T2 or Corporate Tax Return Checklist

COMPANY INFORMATION [FOR NEW CLIENTS unless information has changed]

Legal name		Year end	
Operating name		Business no.	_____RC0001
Business address		City/Prov.	Postal code
Mailing address (if different)		City/Prov.	Postal code
Contact person		Email	Home phone
Business phone		Business fax	Mobile
Bookkeeper		Email	Business phone
Lawyer		Email	Business phone
Shareholder(s) name	SIN or business no.	Percentage common share	Signing officer
			<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No

ENGAGEMENT SERVICES

T2 or corporate tax return Financial statements Bookkeeping Personal tax returns

CORPORATE FILINGS

BC annual report	<input type="checkbox"/> Filed <input type="checkbox"/> Client <input type="checkbox"/> RKC	T4 slips and summary	<input type="checkbox"/> Filed <input type="checkbox"/> Client <input type="checkbox"/> RKC <input type="checkbox"/> NA
GST returns	<input type="checkbox"/> Filed <input type="checkbox"/> Client <input type="checkbox"/> RKC <input type="checkbox"/> NA	T5 slips and summary	<input type="checkbox"/> Filed <input type="checkbox"/> Client <input type="checkbox"/> RKC <input type="checkbox"/> NA
PST returns	<input type="checkbox"/> Filed <input type="checkbox"/> Client <input type="checkbox"/> RKC <input type="checkbox"/> NA	T5018 slips and summary	<input type="checkbox"/> Filed <input type="checkbox"/> Client <input type="checkbox"/> RKC <input type="checkbox"/> NA
GST elections	<input type="checkbox"/> Filed <input type="checkbox"/> Client <input type="checkbox"/> RKC <input type="checkbox"/> NA	WCB return(s)	<input type="checkbox"/> Filed <input type="checkbox"/> Client <input type="checkbox"/> RKC <input type="checkbox"/> NA
Other elections _____	<input type="checkbox"/> Filed <input type="checkbox"/> Client <input type="checkbox"/> RKC <input type="checkbox"/> NA	Other _____	<input type="checkbox"/> Filed <input type="checkbox"/> Client <input type="checkbox"/> RKC

NEW CLIENT

RC59 signed	<input type="checkbox"/> Signed <input type="checkbox"/> Pending	Main product/service	_____
Engagement letter	<input type="checkbox"/> Signed <input type="checkbox"/> Pending	If filing directors' tax return:	
Share rights & restrictions docs	<input type="checkbox"/> Given <input type="checkbox"/> Pending	Directors' T1013 signed	<input type="checkbox"/> Signed <input type="checkbox"/> Pending <input type="checkbox"/> NA
Central securities register	<input type="checkbox"/> Given <input type="checkbox"/> Pending	Prior year personal tax returns	<input type="checkbox"/> Given <input type="checkbox"/> Pending <input type="checkbox"/> NA
Prior year financial statements	<input type="checkbox"/> Given <input type="checkbox"/> Pending <input type="checkbox"/> NA	Directors' T1 checklist	<input type="checkbox"/> Given <input type="checkbox"/> Pending <input type="checkbox"/> NA
Prior year corporate tax return	<input type="checkbox"/> Given <input type="checkbox"/> Pending <input type="checkbox"/> NA	Consent on income splitting	<input type="checkbox"/> Yes <input type="checkbox"/> No
Prior years' CRA assessments	<input type="checkbox"/> Given <input type="checkbox"/> Pending <input type="checkbox"/> NA	Other	_____
Prior year software/bookkeeping	<input type="checkbox"/> Given <input type="checkbox"/> Pending <input type="checkbox"/> NA		

ANNUAL ENQUIRIES

Audit has been waived	<input type="checkbox"/> Yes <input type="checkbox"/> No	Change of registered address	<input type="checkbox"/> Yes <input type="checkbox"/> No
Change of capital structure	<input type="checkbox"/> Yes <input type="checkbox"/> No	Change of major business	<input type="checkbox"/> Yes <input type="checkbox"/> No
Change of directors, officers	<input type="checkbox"/> Yes <input type="checkbox"/> No	Planned changes?	_____

YEAR END DOCUMENTS

Accounting software	<input type="checkbox"/> Given <input type="checkbox"/> Pending <input type="checkbox"/> NA	Mortgage statements	<input type="checkbox"/> Given <input type="checkbox"/> Pending <input type="checkbox"/> NA
Client summary	<input type="checkbox"/> Given <input type="checkbox"/> Pending <input type="checkbox"/> NA	Contract: _____	<input type="checkbox"/> Given <input type="checkbox"/> Pending <input type="checkbox"/> NA
Bank statements/ reconciliation	<input type="checkbox"/> Given <input type="checkbox"/> Pending	Loan agreements	<input type="checkbox"/> Given <input type="checkbox"/> Pending <input type="checkbox"/> NA
Cheque stubs/ deposit books	<input type="checkbox"/> Given <input type="checkbox"/> Pending <input type="checkbox"/> NA	Lease documents	<input type="checkbox"/> Given <input type="checkbox"/> Pending <input type="checkbox"/> NA
Investment statements	<input type="checkbox"/> Given <input type="checkbox"/> Pending <input type="checkbox"/> NA	Sales: invoices/ sales register	<input type="checkbox"/> Given <input type="checkbox"/> Pending <input type="checkbox"/> NA
Aged accounts receivable listings	<input type="checkbox"/> Given <input type="checkbox"/> Pending <input type="checkbox"/> NA	Expenses: receipts/ bills	<input type="checkbox"/> Given <input type="checkbox"/> Pending <input type="checkbox"/> NA
Doubtful accounts (highlighted)	<input type="checkbox"/> Given <input type="checkbox"/> Pending <input type="checkbox"/> NA	Payroll summary or detail	<input type="checkbox"/> Given <input type="checkbox"/> Pending <input type="checkbox"/> NA
Inventory listing	<input type="checkbox"/> Given <input type="checkbox"/> Pending <input type="checkbox"/> NA	Auto expenses	See "Automobile Expenses"
Property, plant & equipment		Home office expense	See "Business-Use-of-Home"
- Addition: purchase docs	<input type="checkbox"/> Given <input type="checkbox"/> Pending <input type="checkbox"/> NA	Expenses paid by shareholder	
- Disposal: sales docs	<input type="checkbox"/> Given <input type="checkbox"/> Pending <input type="checkbox"/> NA	Corporate instalments	
Aged accounts payable listings	<input type="checkbox"/> Given <input type="checkbox"/> Pending <input type="checkbox"/> NA	Direct deposit application	<input type="checkbox"/> Done <input type="checkbox"/> Remind <input type="checkbox"/> Apply
Credit card statements	<input type="checkbox"/> Given <input type="checkbox"/> Pending <input type="checkbox"/> NA		

Richard Kosick & Co. T2 or Corporate Tax Return Checklist

<input type="checkbox"/> BUSINESS	<input type="checkbox"/> RENTAL INCOME & EXPENSES
Income [GST incl/ excl?]	Address
Expenses [GST incl/ excl?]	City/Prov.
Purchases	Postal code
Subcontractor or salaries	Income [GST incl/ excl?]
Advertising & promotion	Expenses [GST incl/ excl?]
Meals & entertainment	Advertising
Insurance	Insurance
Interest, bank charges	Mortgage interest, statement
Licences, dues, fees	Office supplies
Office supplies	Professional fees
Professional fees	Administration fees/ salaries
Repair & maintenance	Repairs & maintenance
Travel	Strata
Telephone	Property taxes
Capital asset >\$500 (e.g. computer)	Heat
Capital asset >\$500 (e.g. equipment)	Hydro
Auto expenses	Water
Home office expense	Internet, phone, cable
Other	Auto expenses
Missing	Capital asset >\$500 (e.g. furniture)
	Capital asset >\$500 (e.g. appliances)
	Other
	Missing

<input type="checkbox"/> BUSINESS-USE-OF-HOME	<input type="checkbox"/> AUTOMOBILE EXPENSES
Business or employment use % =	Automobile: Make _____ Model _____ Year _____
Workspace area	Business auto log: _____ busn km <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Remind client
Total home area	Purchase price
Heat	Business use kilometres
Hydro	Total km driven
Insurance	Expenses [GST incl/ excl?]
Repair & maintenance	Fuel
Strata	Insurance
Mortgage interest	License & registration
Property taxes	Repairs & maintenance
Rent	Business parking fees
Water	<input type="checkbox"/> Loan statement, interest
Internet, phone, cable	<input type="checkbox"/> Lease statement
Other	<input type="checkbox"/> Auto purchase document
Missing	<input type="checkbox"/> Auto disposal document
	Other

FOR OFFICE USE		Takeover letter <input type="checkbox"/> Mailed <input type="checkbox"/> NA
Associated companies ¹	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> More info	Associated Co
Related companies ²	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> More info	Related Co
ADDITIONAL NOTES		
PRICING <input type="checkbox"/> Quoted \$ _____ <input type="checkbox"/> Based on hours spent & complexity <input type="checkbox"/> Outstanding balance \$ _____		

¹ Associated companies: e.g. director, spouse, parents, siblings, or parents-in-law, own(s) > 50% of Co and ≥ 25% of another Co
² Related companies: e.g. director, spouse, parents, siblings, or parents-in-law, own(s) > 50% of another Co